

TRANSMITTAL FORM

Reports Due Annually Not Later Than April 30

Title Insurance Producer Name as Shown on License

EIN_____ License Number_____

Reporting For Year_____ Date Filed_____

____ **Title Insurance Producer Annual Report**

____ Balance Sheet

____ Income and Expense Statement

____ Trust Account Statement

____ Proof of Financial Protection

____ List of Owners (name, address, percentage of ownership)

____ **Controlled Business Report**

By submitting this transmittal form I hereby certify that the required documents and reports are attached.

Submitted by_____

Title_____ Date_____

Telephone_____ Email_____

Submit this transmittal form and the required documents, information, and reports to market.uid@utah.gov